DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

ATTORNEY DOCKET NO. 300204857-4

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

I holiova I am the original first and sole inventor (if only

joint inventor (if plural patent is sought on the Method and Apparatus	names invent	are listed below) of the ion entitled:	ne subject matter wh	below) or an original, first and ich is claimed and for which a		
the specification of which is attached hereto unless the following box is checked:						
() was filed on as US Application No. or PCT International Application						
Number		and was amend	ded on	(if applicable).		
I hereby state that I had including the claims, as disclose all information	amer	ided by any amendme	nt(s) referred to abov	e above-identified specification, ve. I acknowledge the duty to CFR 1.56.		
Foreign Application(s) and/or						
I hereby claim foreign priority inventor(s) certificate listed b a filing date before that of the	elow an	d have also identified below	any foreign application for	any foreign application(s) for patent or patent or inventor(s) certificate having		
COUNTRY		APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED UNDER 35 U.S.C. 119		
GB		0218188.1	Aug 6, 2002	YES: X NO:		
				YES: NO:		
Provisional Application I hereby claim the benefit under Title 35, United States Code Section 119(e) of any United States provisional application(s) listed below:						
		APPLICATION NUMBER	FILING DATE			
U. S. Priority Claim						
insofar as the subject matter manner provided by the first	of each paragra 37, Co	of the claims of this application of Title 35, United States de of Federal Regulations, Se	ation is not disclosed in th s Code Section 112, I ack ection 1.56(a) which occur	States application(s) listed below and, e prior United States application in the nowledge the duty to disclose material rred between the filing date of the prior		
APPLICATION NUMBER		FILING DATE	STATUS (patented/pending/abandoned)		
POWER OF ATTORNEY: As a named inventor, I here business in the Patent and Tra				ecute this application and transact all		
Customer i	Number	022879	Place Customer Number Bar Code Label here			
Send Correspondence to: HEWLETT-PACKARD COM	ADANY		Direct Telepho	ne Calls To:		
Intellectual Property Admi		on	Richard P. Ber	g		
P.O. Box 272400 Fort Collins, Colorado 80	527-240	00	323 934 2300			
made on information a with the knowledge t	nd be hat w under	lief are believed to be illful false statements Section 1001 of Title	true; and further that and the like so ma 18 of the United Sta	are true and that all statements at these statements were made ade are punishable by fine or ates Code and that such willful nt issued thereon.		
Full Name of Inventor: Richard Hull Citizenship: GB						
Residence: 10	Residence: 10 Newcombe Road Westbury-on-Trym Bristol BS9 3QS England					
Post Office Address: Same as residence						

Inventor's Signature

Date

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (continued)

ATTORNEY DOCKET NO. 300204857-4

Full Name of # 2 joint inventor:	Josephine Reid		Citizenship: GB			
Residence:	21 Hopkins Close Thornbury Bristol BS35 2PX					
Post Office Address:	Same as Residence					
Inventor's Signature						
inventor s Signature	Da	ite				
Full Name of # 3 joint inventor:	Stuart Philip Stanton		Citizenship: GB			
Residence:	The Myrtles, Chapel Hill, Newport/B					
Post Office Address:	Same as residence	<u> </u>				
Post Office Address:						
Inventor's Signature	Da	ate				
Full Name of # 4 joint inventor:	·		Citizenship:			
Residence:						
Post Office Address:						
Inventor's Signature						
montor o orginaturo	Di	ate				
Full Name of # 5 joint inventor			Citizenship:			
Residence:	•		Onizensinp.			
Post Office Address:						
rost Office Address.						
Inventor's Signature	· Da	ate				
Full Name of # 6 joint inventor	:		Citizenship:			
Residence:						
Post Office Address:						
Inventor's Signature		ate				
•	J	μιο				
Full Name of # 7 joint inventor	.		Citizenship:			
Residence:			<u>.</u>			
Post Office Address:						
i doi diniso / tualdos.						
Inventor's Signature	D	ate				
Full Name of # 8 joint inventor	r:		Citizenship:			
Residence:						
Post Office Address:						
Inventor's Signature		ato				